

MAY
10/8 10/6

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMC		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AK	12	8/29/00
RESPONSE FORMALITY REVIEW			10/03/00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date		
Final	Original	10/3	2/25
1	✓	/	✓
2	✓	/	✓
3	✓	/	0
4	✓	/	0
5	✓	/	0
6	✓	/	0
7	✓	/	0
8	✓	/	0
9	✓✓	/	0
10	✓✓	/	0
11	✓✓	/	0
12	✓✓	/	0
13	✓✓	/	0
14	✓✓	/	0
15	✓✓	/	0
16	✓✓	/	1
17	✓✓	/	✓
18	✓✓✓	/	✓
19	✓✓✓	/	✓
20	✓✓✓	/	✓
21	✓✓✓	/	✓
22	✓✓0		
23	✓✓0		
24	✓✓6		
25	✓✓0		
26	✓✓0		
27	✓✓0		
28	✓✓0		
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30	✓✓0		
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44	✓✓0		
45	✓✓0		
46	✓✓0		
47	✓✓0		
48	✓✓0		
49	✓✓6		
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Claim	Date		
Final	Original	51	52
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Claim	Date		
Final	Original	101	102
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If more than 150 claims or 10 actions
staple additional sheet here

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